

01-10-01

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**NON-PROVISIONAL  
UTILITY PATENT APPLICATION  
TRANSMITTAL - 37 CFR 1.53(b)**

☐ **Duplicate**  
(check, if applicable)

Assistant Commissioner for Patents  
**BOX PATENT APPLICATION**  
Washington, DC 20231

**Attorney Docket No. 210582.0001/1US**  
**First Named Inventor: Eugene Roussel**  
**Express Mail Label No. EL631611406US**  
**Total Pages of Transmittal Form: 2**

Transmitted herewith for filing is the non-provisional utility patent application entitled:

**Therapeutic Modulation of the Tumor Inflammatory Response**

which is:

an ☒ Original; or

a ☐ Continuation, ☐ Divisional, or ☐ Continuation-in-part (CIP)  
of prior Application No. &@ filed&@.

Anticipated Group/Art Unit: &@ or Class &@, Subclass &@.

☐ This non-provisional patent application is based on Provisional Patent Application  
No. &@, filed &@.

Enclosed are:

- ☒ Specification (including Abstract) and claims: 40 pages.
- ☒ Application Data Sheet.
- ☒ Non-executed Declaration (original/copy).
- ☐ Copy of Declaration from prior application.
- ☐ Separate Power of Attorney (including 37 CFR 3.73(b) statement, if applicable).
- ☐ &@ sheets of drawings (formal) plus one copy.
- ☐ Microfiche computer program (Appendix).
- ☐ Nucleotide and/or Amino Acid Sequence Submission, including:
  - ☐ Computer readable copy ☐ Paper Copy ☐ Verified Statement.
- ☐ Under PTO-1595 Cover Sheet, an assignment of the invention
- ☐ Name of Assignee: &@
- ☐ Certified copy(ies) of &@ Application No(s). &@ filed &@ is/are filed:
  - ☐ herewith or ☐ in prior application &@.
- ☒ Applicant(s), by its/their undersigned attorney, claim(s) Small Entity Status under  
37 C.F.R. §1.27 as ☒ an Independent Inventor, or ☐ a Small Business Concern,  
or ☐ a Non-Profit Organization.
- ☒ Preliminary Amendment.
- ☐ Information Disclosure Statement, PTO-1449, and cited references.
- ☐ Request for Nonpublication of Application Under 35 U.S.C. §122(b)
- ☐ Other: &@

jc872 U.S. PTO  
09/756978  
01/09/01

jc976 U.S. PTO  
01/09/01

09756978-010901

The filing fee is calculated as follows:

			SMALL ENTITY			LARGE ENTITY	
CLAIMS	NO. FILED	NO. EXTRA	BASIC FEE:			BASIC FEE:	
			\$355			\$710	
Total	68-20 =	48	X9	\$ 432	OR	X18	\$
Independent	4- 3=	1	X40	\$ 40	OR	X80	\$
<input type="checkbox"/> Multiple Dependent Claims Present			\$135	\$	OR	\$270	\$
			<b>TOTAL</b>	<b>\$ 1187</b>	OR	<b>TOTAL</b>	<b>\$</b>

- ☐ **The Commissioner is not authorized to charge the filing fee at this time as we elect to defer payment of the entire filing fee until receipt of a Notice to File Missing Parts.**
- ☐ A check in the amount of \$\_\_\_\_.00 to cover the filing fee is enclosed.
- ☒ The Commissioner is hereby authorized to charge and/or credit **Deposit Account No. 50-1017 (Billing No. 210582.0001/1US)** as noted below. A duplicate copy of this sheet is enclosed.
- ☒ Any overpayments or deficiencies in the above-calculated fee.
- ☒ Filing fee in the amount of \$ **1,187** as calculated above.
- ☒ Any additional fees required under 37 C.F.R. § 1.16 and § 1.17.
- ☒ In the event that a Petition for Extension of Time is required during the prosecution of this application, but not submitted, please charge any extension fee under 37 C.F.R. § 1.136(a) to our Deposit Account noted above.

**CORRESPONDENCE ADDRESS:**

9 January 2001  
(Date)

By: \_\_\_\_\_

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